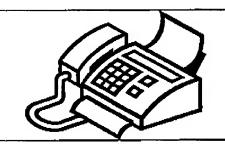
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JUL 0 9 2007



To: Shumaya B. Ali Fax number: 571-273-8300

Date: 7/9/2007

A facsimile from

Paul Thompson 858-202-3193

Regarding: Office Action dated 4/4/07

Comments:

24 pages including this

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JUL 0 9 2007

Date:07/07/07

Response to Office Action dated 04/04/07

Re: 10/634,369

Thank you for helping me straighten out some mistakes. It also made me realize I have not communicated what my invention really is. I have included some comments from users of my cannulas to help convey that this invention is a big deal with many improvements that make a difference in their lives. I also took some photos of brand X and my cannulas to show the difference. My invention is simple and very effective and the pieces have been around a long time but no one else has ever put the pieces together. If they had it would be too valuable not to have it patented. In a nutshell I will show that using soft (actually more flexible) tubing is contrary to what is known about making cannulas. And I will show that using more flexible tube for a cannula is a worthless idea without a second bit of information about the nosepiece. There isn't anything to suggest softer hose let alone anything that suggests both the more flexible hose and a certain nosepiece.

Therefore, before I address each point in the letter, I want to attempt to clarify what my invention is. It is an invention in its truest sense. It is very effective and, although the end result is simple, it required, insight, craftsmanship, perseverance and a bit of luck. This invention must be considered as a whole because the individual pieces aren't very new (except the nosepiece). Simple does not automatically mean obvious, particularly when it is completely opposite to what has been known for many years

Patent and design history of the nasal cannula

Vinyls (PVC or polyvinylchloride) were first employed to fabricate disposable medical devices during World War II. Since then, vinyl has become by far the most commonly used polymer in the medical plastics industry.

Today, millions of cannulas are manufactured per year and nearly all of them use a design that dates back to 1957. In the 50 years since there have been two more major innovations (out of at least 85 patents and applications related to cannulas) and mine is the fourth. Short story:

- 1. 1957, #2,931,358, D.S. Sheridan-used two small diameter oxygen tubes instead of straps to support nosepiece. Actually the ends of the tubes were pointed into the nostrils
- 2. 1969, #3,643,660, Hudson-invented an injection-molded nosepiece designed to align itself with the face to point the prongs so they don't blow oxygen on the sensitive nasal wall. Inexpensive to produce, these cannulas were manufactured in the hundreds of millions and are still the most widely used. The cannula with an injection molded nosepiece supported by two hoses is what I refer to when I say "modern cannula".
- 3. 1977, #4,106,505, Salter-introduces a dip molded nosepiece that is softer and points the oxygen prongs more accurately. The body is tall and narrow and wraps